

For MMWR week 26 (June 25, 2023 - July 1, 2023)



All data presented in this report are provisional and may change as additional reports are received .

See the Survillance Methods page for a detailed description of each component of the lowa respiratory virus surveillance system including methodology and definitions.

QUICK STATS FOR WEEK 26

Visit https://hhs.iowa.gov/influenza/reports to subscribe to weekly email reports

INFLUENZA

Overall Influenza Activity: Low

Lab Survey Flu Positive % (PCR and Ag)

0.9%

Predominant Flu at SHL (3 weeks)

B - Victoria

Long Term Care Flu Outbreaks

0

Flu Hospitalizations -All Iowa Hospitals

2

Outpatient ILI %

0.27%

Flu Deaths
Cumulative 2022-23

144

COVID-19

Overall COVID-19 Activity: Low

Lab Survey
COVID-19 Positive %
(PCR and Ag)

4.3%

Predominant COVID Lineage (8 weeks)

XBB.1.5

COVID-19 ER Visits - Syndromic Surveillance

154

COVID-19 Hospitalizations -All Iowa Hospitals COVID-19 Deaths Cumulative 2022-23

21 811

OTHER RESPIRATORY VIRUSES

Top 3 Pathogen Groups by Positive Percent on Respiratory Virus Survey - Molecular Only

Rhinovirus/Enterovirus

Percent Positive for Current Week

Parainfluenza virus 8.6%

15.8%

Adenovirus 5.8%

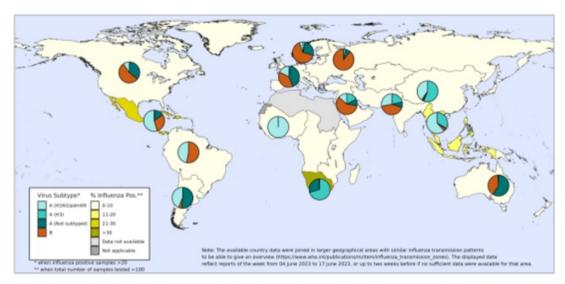
Positive Percent by Week



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INTERNATIONAL INFLUENZA ACTIVITY SUMMARY - WHO

Percentage of respiratory specimens testing positive for influenza, by influenza transmission zone¹. Map generated on 23 June 2023.



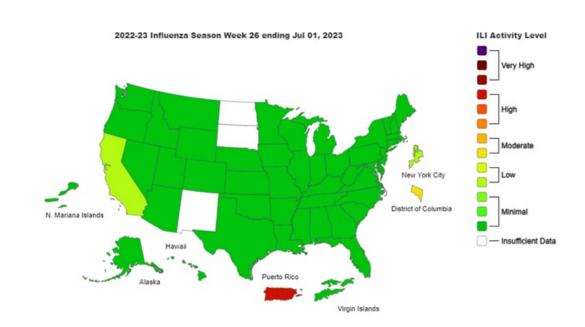
The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the logal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Detted and disshed lines on m represent approximate border lines for which there may not yet be full agreement.

Data source: Global Influenza Surveillance and Response System (GISRS), FluNet (www.who.int/tools/flune

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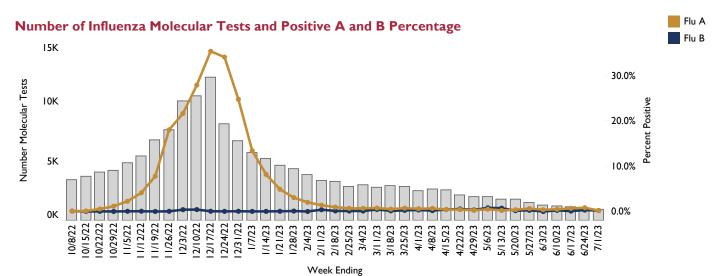
Data Source: Global Influenza and Response System (GISRS), FluNet (www.who.int/flunet). https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update

NATIONAL INFLUENZA LIKE ILLNESS (ILI) - CDC

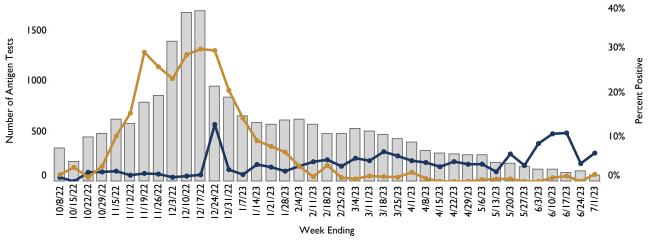


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IOWA RESPIRATORY SURVEY - INFLUENZA



Number of Influenza Antigen Tests and Positive A and B Percentage



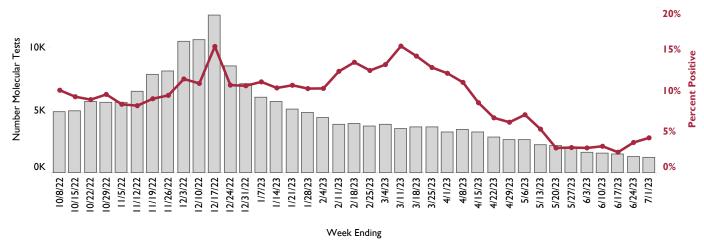
Flu Tests by Region - Current Week

Flu Region Text	Number Positives	Number Tests	Percent Positive
I-C	1	361	0.3%
2-NE	1	68	1.5%
3-NW	0	8	0.0%
4-SW	0	10	0.0%
5-SE	4	50	8.0%
6-E	3	500	0.6%
Total	9	997	0.9%

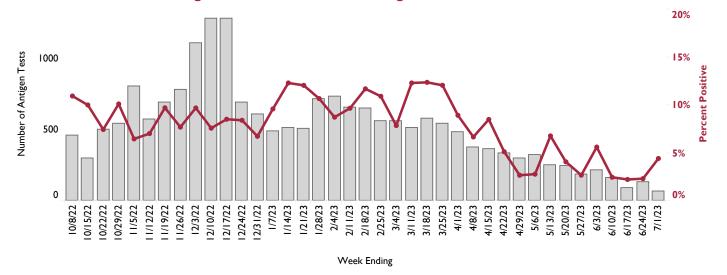
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IOWA RESPIRATORY SURVEY - COVID-19

Number of COVID-19 Molecular Tests and Positive Percentage



Number of COVID-19 Antigen Tests and Positive Percentage



COVID-19 Tests and Positivity by Region - Current Week

Flu Region Text	Number Positives	Number Tests	Percent Positive
I-C	24	490	4.9%
2-NE	I	57	1.8%
3-NW	0	16	0.0%
4-SW	0	22	0.0%
5-SE	I	34	2.9%
6-E	28	645	4.3%
Total	54	1,264	4.3%

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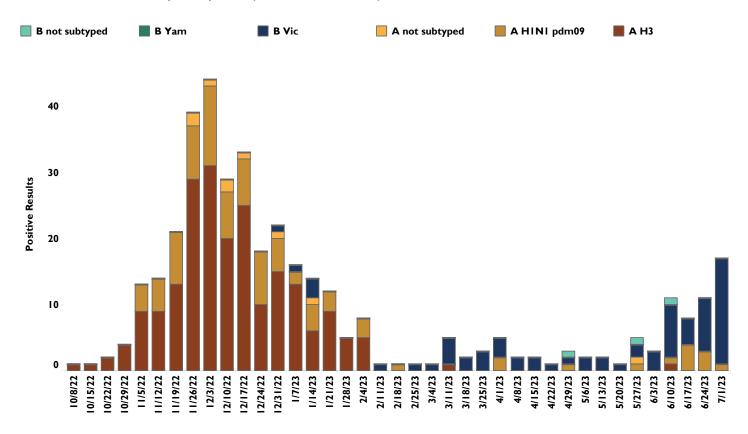
INFLUENZA TESTING AT THE STATE HYGIENIC LABORATORY (SHL)

Cumulative Influenza Viruses Detected by SHL by Age Group (10/3/2021 - Current Week)

	Influenza A			Influenza B				
Flu Lab Age Group	A not subtyped	A HINI pdm09	А Н3	Total	B not subtyped	B Vic	B Ya m	Total
0-4	0	10	37	47	0	16	0	16
5-17	3	23	58	84	3	10	0	13
18-24	0	8	28	36	0	6	0	6
25-49	1	22	32	55	0	36	0	36
50-64	2	11	12	25	0	3	0	3
65 and over	3	16	42	61	0	1	0	1
Unknown	0	0	0	0	0	0	0	0
Total	9	90	209	308	3	72	0	75

Table Note: Only lowa residents are included. Specimens listed as "not subtyped" may be pending or were not able to be subtyped due to weak positive lab results. This can be due to poor collection, timing of collection or stage of infection.

Influenza Viruses Detected by SHL by Week (10/3/21 - Current Week)

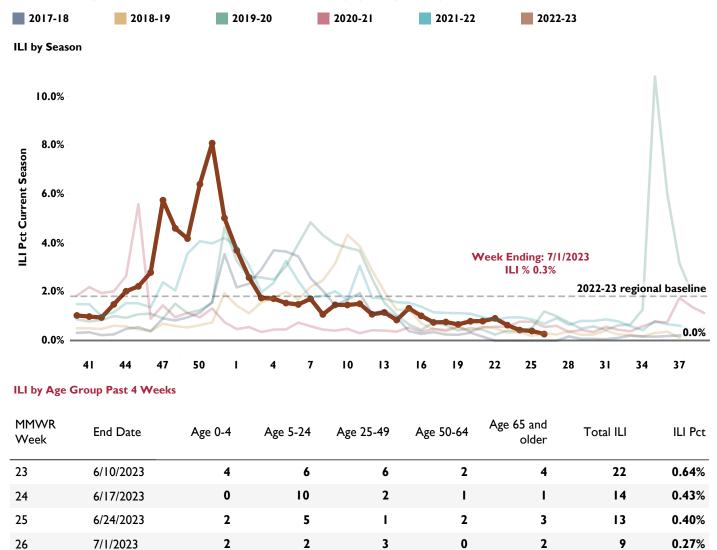


SHL Flu Testing Note: The State Hygienic Laboratory (SHL) is the primary laboratory in lowa characterizing specimens for influenza surveillance. SHL reports the number of tests performed and the type and subtype/lineage of positive tests to the influenza surveillance network daily. SHL also sends a portion of specimens to CDC for further characterization.

For MMWR week 26 (June 25, 2023 - July 1, 2023)

OUTPATIENT HEALTH CARE PROVIDER SURVEILLANCE PROGRAM (ILINET)

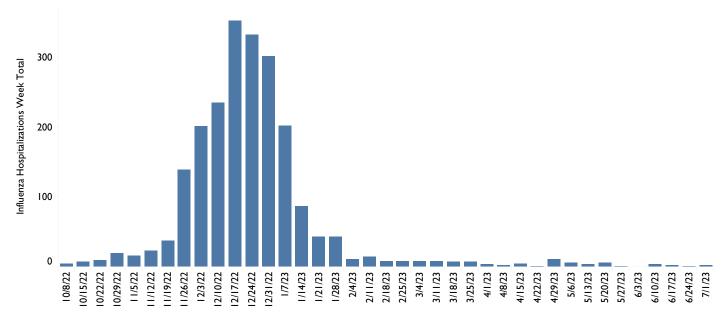
Percent Of Outpatient Visits Attributed to Influenza-like Illness (ILI) as Reported by ILINet Sites



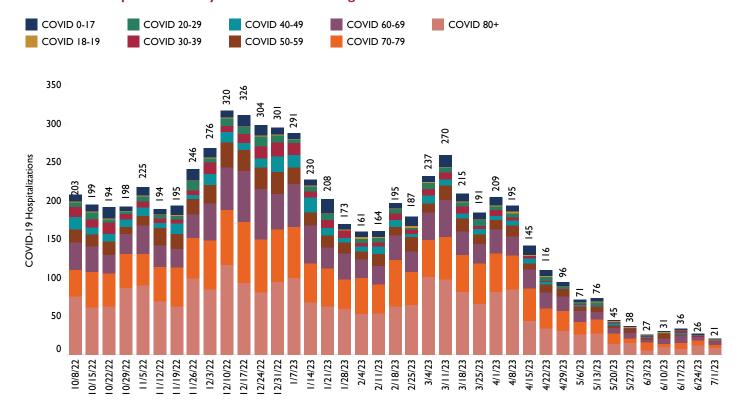
Outpatient ILI Note: Outpatient health care providers who participate in the ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week. The ILI Definition changed in 2021-22 so that persons with ILI symptoms (cough, sore throat, fever) will be counted even if positive for other respiratory illness (e.g., COVID-19) which makes comparison across seasons difficult.

For MMWR week 26 (June 25, 2023 - July 1, 2023)

Influenza Hospitalizations by Week at Iowa Hospitals - HealthData.gov



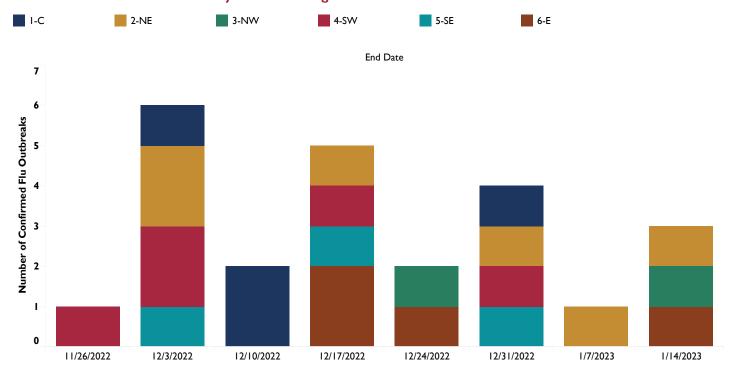
COVID-19 Hospitalizations by Week - HealthData.gov



For MMWR week 26 (June 25, 2023 - July 1, 2023)

CONFIRMED LONG TERM CARE FACILITY INFLUENZA OUTBREAKS

Confirmed Influenza Outbreaks by Week and Region



Long Term Care Facility Outbreaks Note: A confirmed influenza outbreak in a care facility is defined as at least two residents with lab-confirmed influenza in the same area of a facility having an illness onset within 72 hours of each other.

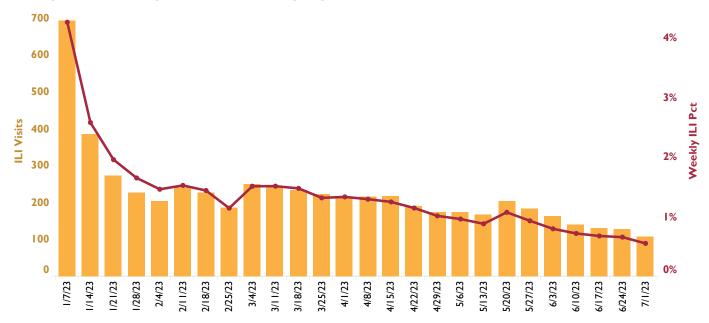
Confirmed Long Term Care Influenza Outbreaks by Region

Iowa Flu Region	Outbreaks Current Week	Outbreaks Cumulative
I-C	0	4
2-NE	0	6
3-NW	0	2
4-SW	0	5
5-SE	0	3
6-E	0	4
Total	0	24

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IOWA SYNDROMIC SURVEILLANCE PROGRAM

Weekly Count and Proportion of Iowa Emergency Room Visits for Influenza-like Illness



ILI Percent Definition: Proportion of lowa residents with influenza-like illness by chief complaint or discharge diagnosis as a proportion of all lowans visiting participating lowa emergency rooms with a valid chief complaint or discharge diagnosis.

Weekly Count and Proportion of Iowa Emergency Room Visits for COVID-19



COVID Definiton: Weekly count of lowa residents visiting participating lowa emergency rooms and who had a COVID-19 discharge diagnosis. Proportion of COVID-19 visits uses the weekly count defined above as the numerator and the total of all lowans visiting participating lowa emergency rooms with any valid discharge diagnoses.

For MMWR week 26 (June 25, 2023 - July 1, 2023)

Percent of Iowa Residents Fully Vaccinated for COVID-19 by County

Vaccine Status - Use the drop-down menu to change the data shown Fully Vaccinated

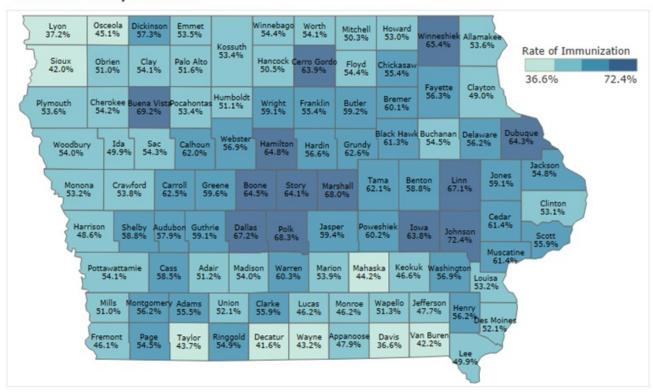
Age Group - Use the drop-down menu to change the data shown $_{\Delta \rm II}$

COVID-19 Vaccination Rates

Age Group: All

Vaccine Status: Fully Vaccinated

Reported in IRIS as of 5/31/2023



State of Iowa

Age Group: All

Vaccine Status: Fully Vaccinated

56	elec	tea	Co	um	ties	S

Age Group: All

Vaccine Status: Fully Vaccinated

Rate of Immunization	60.2%	Rate of Immunization
# of Immunized Patients	1,905,696	# of Immunized Patie
Census Population Estimate	3,163,561	Census Population Es
Number of Monovalent Boosters	1,372,616	Number of Monovaler
Number of Bivalent Doses	629,051	Number of Bivalent D

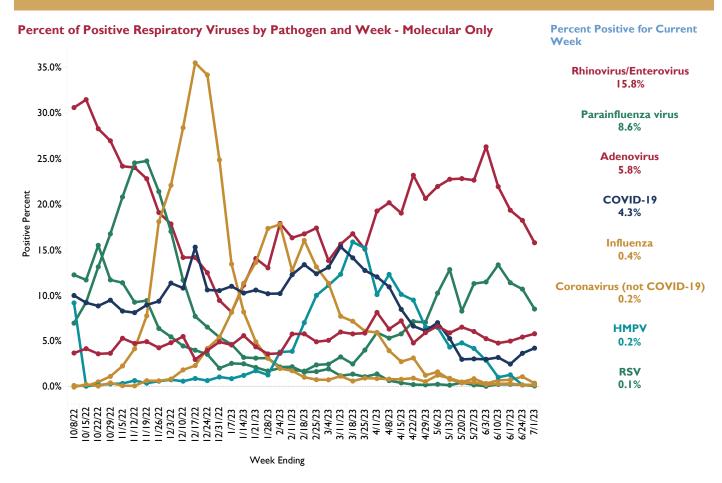
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Data source: https://tracking.idph.iowa.gov/Health/Immunization/covid-19-vaccine/data

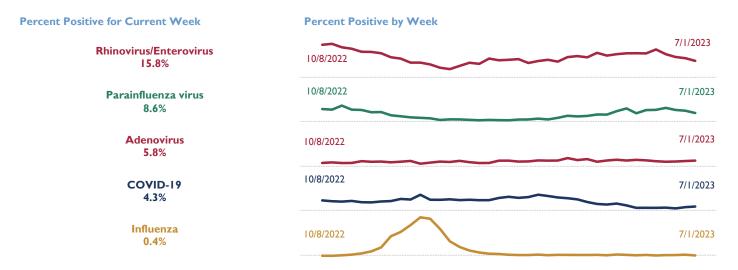
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IOWA RESPIRATORY VIRUS SURVEY

Pathogens are grouped together if even if reported to lowa HHS as separate types or subtypes (e.g., Parainfluenza Viruses I, 2, 3, and 4). Only pathogens with at least one positive result this season are shown.



Top 5 Pathogen Groups by Positive Percent on Respiratory Virus Survey - Molecular Only



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REPORT METHODS, DEFNITIONS AND DATA SOURCES

NATIONAL INFLUENZA LIKE ILLNESS (ILI) - CDC

The CDC national ILI map shows influenza-like illness, which is determined by symptoms such as fever, cough, and sore throat that can be caused by a number of pathogens in addition to influenza (e.g., COVID-19). Detailed information can be found online at www.cdc.gov/flu/weekly/.

IOWA RESPIRATORY SURVEY

lowa HHS and SHL run a weekly web-based survey program where laboratorians report the number of influenza, COVID-19 and other respiratory virus tests performed, the testing method (molecular, antigen, or virus isolation) and the number of positive tests.

INFLUENZA TESTING AT THE STATE HYGIENIC LAB

The State Hygienic Laboratory (SHL) is the primary laboratory in lowa characterizing specimens for influenza surveillance. SHL reports the number of tests performed and the type and subtype/lineage of positive tests to the influenza surveillance network daily. SHL also sends a portion of specimens to CDC for further characterization.

OUTPATIENT HEALTH CARE PROVIDER SURVEILLANCE PROGRAM (ILINET)

Outpatient health care providers who participate in ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week.

INFLUENZA AND COVID-19 HOSPITALIZATIONS - US HHS

lowa hospital report COVID-19 hospitalization data to the US Department of Health and Human Services, which includes several questions about influenza hospitalizations. Visit the following site for more information on the dataset used to create this visualization: https://healthdata.gov/Hospital/COVID-19-Reported-Patient-Impact-and-Hospital-Capa/g62h-syeh

INFLUENZA AND COVID-19 DEATHS:

The lowa HHS Center for Acute Disease Epidemiology works with the Bureau of Health Statistics to monitor mortality among lowa residents related to Influenza and COVID-19. Deaths are considered to be influenza-associated when influenza is listed on the death certificate. COVID-associated deaths are determined by diagnosis codes listed on the death certificate.

Both Influenza and COVID-19 death totals are cumulative from the start of the fllu season (October 2, 2022 through the end or the current reporting week).

LONG TERM CARE FACILITY INFLUENZA OUTBREAKS

A confirmed influenza outbreak in a care facility is defined as at least two residents with lab-confirmed influenza in the same area of a facility having an illness onset within 72 hours of each other.

IOWA SYNDROMIC SURVEILLANCE

lowa HHS, CyncHealth Iowa and CDC started implementing syndromic surveillance for the state of Iowa in May 2021. Iowa continues to enroll hospitals to participate and currently has over 70 hospitals participating. Syndromic surveillance provides public health with a near real time system for detecting, understanding, and monitoring health events based on symptoms and diagnoses of patients visiting participating hospitals.

INFLUENZA AND COVID-19 IMMUNIZATIONS

Seasonal influenza vaccination data in Iowa is based on doses reported to the Iowa Immunization Registry Information System (IRIS) for Iowans. IRIS is a confidential, computerized, population-based system that tracks immunization for children, adolescents and adults who are seen at public and private healthcare provider sites throughout the state of Iowa. The data for the current influenza season is updated weekly and there may be a lag between the vaccine administration date and the date reported to IRIS.

COVID-19 vaccine data is also based on doses data reported to IRIS, but the COVID-19 vaccine data is updated monthly.